

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10621400

FILING DATE 07-21-13

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	/					
2		1				
3		1				
4		1				
5		1				
6	1					
7		1				
8		1				
9	1	2				
10	1					
11		1				
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TOTAL IND.	3					
TOTAL DEP.	15	←	←	←		
TOTAL CLAIMS	19	██████	██████	██████	██████	██████

	IND	DEP	IND	DEP	IND	DEP
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TOTAL IND.			←	←	←	
TOTAL DEP.			←	←	←	
TOTAL CLAIMS		██████	██████	██████	██████	██████